



PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0451-0032
U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 52-170 Attorney Docket Number **DECLARATION FOR UTILITY OR** SORENSEN First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION Application Number (37 CFR 1.63) Herewith Filing Date X Declaration Declaration Submitted after Initial Submitted ΩR Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name required) As the below named inventor, I hereby declare that: My residence, mailing address, and chizenship are as stated below next to my name; I believe I am the original and first inventor of the subject matter which is cialmed and for which a patent is sought on the invention entitled; ORGANIZING IDEAS ACCUMULATED IN A COMPUTER DATABASE (Title of the Invention) the specification of which is attached hereto as United States Application Number of PCT International 08/24/2001 X was filed on (MM/DD/YYYY) (if applicable). SOCKHER PERSONAL PROPERTY PROP PCT/USO1/26463 Application Number and is amended by a Preliminary Amendment filed herewith I hereby state that I have reviewed and understand the contents of the above Identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. i hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(a) for patent, inventor's or plant presents rights cartificate(e), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by chacking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is interest. cielmed. Cartiflod Copy Attached? Priority Foreign Filing Date Prior Foreign Application YE8 Not Claimed Country IMM/DD/YYYY) Number(s)

Additional foreign application numbers are listed on a supplemental priority deceahest PTO/SB/02B attached herato:
[Page 1 of 2]

Attorney Docket No. 52-170

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 3551-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. Paper and Trademark Office U.S. DEPARTMENT OF COMMERCE U.S. DEPARTMEN

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Num or Bar Code L			OR [Corre	spondance address below	
Name						
Address		Т	·	T	<u> </u>	
		State			ZIP	
City		Tordia				
Country	Telephoné				Fax	
Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful talse statements may jeopardize the validity of the application or any patent issued themon.						
NAME OF SOLE OR FIRST INVENTOR: A patition has been filed for this unsigned inventor						
Given Name JENS ERIK Family Name or SURENSEN			<u> </u>			
(first and middle [H any]) Inventor's June Suk June 10-25-01						
Signature got Come de						
RANCHO SANTA FE	J 52.3	CA	USA	,	DENMARK Citizenship	
Residence: City	State		Country		- Additional Section by	
14431 BELLVISTA DRIVE						
RANCHO SANTA FE	CA State		9206 ZIP		USA Country	
NAME OF SECOND INVENTOR:	A petition h	as baen	filed for this	unsigne	d inventor	
Given Name JENS OLE Family Name SORENSEN						
Inventor's To Date 24 Oct 01						
CAYMAN KAI GRAND CAYN		AN	CAYMAN ISLAN	NDS KYX	DENMARK Chizenahip	
P O BOX 221 NORTH SIDE						
Mailing Address	GRAND		<u> </u>		CAYMAN	
	State CAYM	AN	ZIP		Country ISLANDS	
City PTOMORIVA amached hereto						
Additional inventors are being named on thesupplemental Additional inventor(s) and attacks the con-						

[Page 2 of 2]

1-04

2-00

Please type a plus sign (+) inside this box —

PTO/SB/81 (02-01)

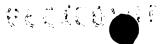
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	HEREWITH
First Named Inventor	SORENSEN
Title	ORGANIZING IDEAS
Group Art Unit	
Examiner Name	
Attorney Docket Number	52-170

I hereby appoint:				
Practitioners at Customer Number 22653 OR Practitioner(s) named below:	Place Customer Number Bar Code Label here			
Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the application ide business in the United States Patent and Trademark Office conn				
Please change the correspondence address for the above-identif The above-mentioned Customer Number. OR Practitioners at Customer Number OR	Place Customer Number Bar Code Label here			
Firm or Individual Name				
Address				
Address				
City	tate Zip			
Country				
Telephone F.	ax			
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assigned	of Record			
Name JENS ERIK SORENSEN				
Signature Jer Eik De	les Eik De			
Date 04 25 2001				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
*Total of 2 forms are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this how -

PTO/S8/81 (02-01)

Approved for use through 10/31/2002 CM8 0651-0035

U.S. Patent and Tradomark Office: U.S. DEPARTMENT OF COMMERCE

Under the Population Act of 1895, no persons are required to respond to a collection of information unless it display a valid OM8 control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filling Date	HEREWITH
First Named Inventor	SORENSEN
Talo	ORGANIZING IDEAS
Group Art Unit	
Examiner Name .	
Aftorney Docket Number	52-170

hereby appoint: X Practitioners OR	at Customer Number 226	<u>i53</u>	Place Customer Number Bar Code Lebel here
	named below:		
	Name	Regist	ration Number
ļ			
business in the Unit	s) or agent(s) to prosecute the ap ad States Patent and Trademark	Olice connected more	
Please change the c	correspondence address for the a	bova-identified application	on to:
OR Practitioners at	Customer Number		Place Customar Number Ber Code Laboi hare
OR Firm of			
Individual Name			
Address		· · · · · · · · · · · · · · · · · · ·	
Address		State	Zip
City		1 3141/51	
Country		Fex	
Telephone I am the: Applicant/In: Assignee of Statement u	record of the entire interest. See Inder 37 CFR 3.73(b) is enclosed	37 CFR 3.71. I. (Form PTOISBI96).	
	SIGNATURE of Applican	t or Assignee of Record	
Name	JENS OLE SORENSEN	1	
Signature	Jas Clib 4km		
	24 Oct 01	<u>!</u>	mentured are constant Risbook multiple
NOTE: Signatures of all the	inventors or assigness of record of the cause is required, see below.	entire interest or their represer	JIEHABÍO) ELO I OTENAN CONTENTE MAISTA
Total of 2	forms are submitted.		needs of the individual case. Any contracts

Burden Hour Statement: This form is nationated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of thris you are required to complete this form should be earl to the Chief Information Officer, U.S. Petent and Trademark Office, Weshington, OC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assisted Commissioner for Petenta, Washington, DC 20231.